

# Capital Eye Consultants, P.C.

James E. Powers, O.D.  
James W. Mattern, O.D.  
Consultative Optometry

John C. Baldinger, M.D.  
Ophthalmic Surgeon  
Cataracts and LASIK

Randall V. Wong, M.D.  
Ophthalmic Surgeon  
Vitreous and Retina

Sohelia Rostami, M.D.  
Ophthalmic Surgeon  
Plastic and Reconstructive

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3025 Hamaker Court, Suite 101 – Fairfax, Virginia 22031 – (703) 876-9630 – FAX (703) 876-0163

Dear Patient:

Welcome to Capital Eye Consultants, P.C. We are pleased that you have been referred to us for further ophthalmic care. Our staff is comprised of well-qualified professionals who use a team approach to bring you the highest quality treatment in a warm, caring setting.

To better serve you, we have enclosed information that will answer many of the questions most patients have. Also enclosed are our Patient Registration form and a History and Physical form for you to fill out and bring with you to your first appointment. Or, you may visit our web site and download this information at [www.ceceyes.com](http://www.ceceyes.com).

If you should have any questions that are not addressed clearly in the enclosed information, please feel free to contact a member of our staff at the number provided above.

Sincerely,

The Doctors and Staff of Capital Eye

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## GENERAL INFORMATION

**Office Hours:** Our office hours are Monday through Friday 9:00 AM until 5:00 PM. We are closed for lunch daily from 12 noon – 1:00 PM. When the office is closed, we have a physician on call for emergency situations.

**Appointments:** We see all patients on an appointment basis and ask that you call in advance so that we may reserve a time for you. If you are unable to keep an appointment, 24-hour notice is requested. Missed appointments are subject to a 50.00 fee. If you are more than 15 minutes late for your appointment, we ask to reschedule your appointment.

If you are visiting our office for the first time, please arrive 20 minutes in advance to complete the registration process and bring the following with you: (1) a photo ID, (2) current insurance card(s), (3) completed Registration Form and History and Physical Form and (4) a current insurance referral (if your insurance requires it). Failure to provide us with an insurance card or a current insurance referral could result in your not being seen by a doctor. You can have your referral faxed to us at 703-876-0163.

If you are having a cataract evaluation and you are a contact lens wearer, we ask that you remove them prior to your visit. For soft lens wearers, generally 10 days without lenses sufficient. Rigid Gas Permeable(RGP) lenses require more time for corneal stabilization. We ask that you go without them for 3 weeks. Allowing corneal stabilization will give us the most accurate measurements and you the most accurate surgical outcome.

Your Optometrist may have forwarded to us your recent clinical exam information. If you it yourself, please bring it with you to your appointment.

**Insurance:** If you have an insurance that our office participates with, we will submit your claim for you. Your co-payment is due at the time of your service.

If we do not participate with your insurance plan, payment in full is expected at the time services are rendered. For your convenience, Visa, MasterCard, Discover, American Express, personal checks and cash are accepted.

**Medical Records Release:** Please note that HIPAA regulations allow only you, the patient, to sign to have your records released to yourself or another physician. Charges for copying medical records will be assessed and are in compliance with the State of Virginia medical record copying guidelines. Payment is requested prior to the release of your records.

We want to make every effort to assist you so that your care and interaction with Capital Eye Consultants, P.C. is as pleasant as possible.